

Applicant or Patentee: \_\_\_\_\_ Attorney's  
Serial or Patent N o.: \_\_\_\_\_ Docket No.: USP1122A-JMG  
Filed or Issued: \_\_\_\_\_  
For: \_\_\_\_\_

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9 (f) and 1.27 (b)) - INDEPENDENT INVENTOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9 (c) for purposes of paying reduced fees under section 41 (a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled:

IgY Against Dental Caries and Dental Caries-Preventive Combination described in:

☒ the specification filed herewith  
application serial no. \_\_\_\_\_, filed \_\_\_\_\_  
☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9 (c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a non profit organization under 37 CFR 1.9 (e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☐ no such person, concern, or organization  
☒ person, concern or organizations listed below\*

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

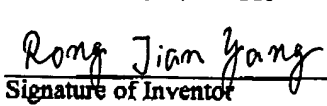
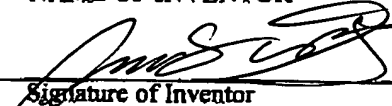
FULL NAME Jason Medical Holding, Inc. (USA)  
ADDRESS 475 El Camino Real, Suite 218, Millbrae, CA 94030, USA  
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28 (b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statements is directed.

Rong Jian YANG Shing PAAU  
NAME OF INVENTOR NAME OF INVENTOR NAME OF INVENTOR  
   
Signature of Inventor Signature of Inventor Signature of Inventor  
Date July 8, 2000 Date July 8, 2000 Date \_\_\_\_\_

Applicant or Patentee:

Serial or Patent No.:

Filed or Issued:

For:

Attorney's

Docket No.:

USP1122A-JMG

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9 (f) and 1.27 (e)) - SMALL BUSINESS CONCERN**

I hereby declare that I am

☒ the owner of the small business concern identified below:

☐ an official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern: Jason Medical Holdings, Inc. (USA)

Address of Concern: 475 El Camino Real, Suite 218, Millbrae, Ca 94030, USA

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9 (d), for purposes of paying reduced fees under section 41(a) and (b) of title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power of control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention entitled:

IgY Against Dental Caries Bacteria and Detnal Caries-Preventive Combination

described in:

☒ the specification filed herewith

☐ application serial no. \_\_\_\_\_, filed \_\_\_\_\_

☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as a small entities. (37 CFR 1.27)

Full Name:

Address:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NON PROFIT ORGANIZATION

Full Name:

Address:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NON PROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28 (b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statements is directed.

Name of Person Signing: Shing PAAU

Title of Person Other than Owner: Executive Director

Address of Person Signing: 475 El Camino Real, Suite 218, Millbrae, Ca 94030, USA

Signature

Date

8-7-2000

## DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

IgY Against Dental Caries and Dental Caries - Preventive Combination

the specification of which is attached hereto unless the following box is checked:

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

## Prior Foreign Application(s)

(Number)	(Country)	(Day/Month/Year Filed)	Priority Claimed <input type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claimed the benefit under 35 USC 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 USC 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Number)	(Filing Date)	(Status-patented, pending, abandoned)
(Application Number)	(Filing Date)	(Status-patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s), with full powers of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**Raymond Yat Chiu Chao, Reg. No. 37,484**

Address all correspondence to: 1050 Oak Dale Lane, Arcadia, CA 91006, USA

Telephone Calls to: (626) 571-9812

I hereby declare that all Statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) Rong Jian YANG

Inventor's signature Rong Jian Yang Date July 8, 2000  
 Residence Same as below Citizenship Hong Kong, PRC  
 Post Office Address Rm A6 Fl., Success Commercial Blvd., Hemessy Rd., Wan Chai, Hong Kong

Full name of second joint inventor, if any (given name, family name) Shing PAAU

Second Inventor's signature [Signature] Date July 8, 2000  
 Residence Same as below Citizenship Hong Kong, PRC  
 Post Office Address Unit 1205, 12/F., Sino Plaza, 255 Gloucester Rd., Causeway Bay, Hong Kong

☐ Additional inventors are being named on separately numbered sheets attached hereto.